Data Consortium Meeting Summary 10-06-09

The Kansas Health Policy Authority (KHPA) hosted the fourth 2009 (tenth overall) meeting of the Data Consortium on Tuesday, October 6th at the Curtis State Office Building in Topeka. 37 persons attended, representing 24 agencies, organizations and businesses.

Kansas Health Indicators Document

Dr. Hareesh Mavoori highlighted updates that have been made to the document since the last meeting. They include:

- stratification/drill-down capability by demographic and time variables for select indicators
- interactive selection menu interface to allow sub-setting by multiple "slicer" variables
- 14 indicators updated with most recent data (2008, 2009 and 2010)
- web usage tracking statistics now available, by indicator to gage user needs

State Level Data Initiatives of Interest

Kendra Tinsley presented an overview of the Kansas Healthcare Collaborative, a provider-led organization founded by the Kansas Medical Society and Kansas Hospital Association focused on being a quality and patient safety resource for providers. She gave a brief explanation of the organization's First Summit on Quality, to be held October 16th at Maner Conference Center (Capitol Plaza Hotel) in Topeka. There will be 8 breakout sessions on a variety of topics. Keynote presentations will be: "A Systematic Approach to Clinical Excellence" by Dr. Michael Leonard, and "Immunization of Healthcare Workers: the Compelling Case for Change" by Dr. Tom Evans. Contact Kendra Tinsley at ktinsley@kmsonline.org for further information.

Data Analytic Interface Update

The first round of user acceptance testing was completed by 26+ KHPA staff members during the last 2 weeks of August. A second round of testing is planned in November-December; launch date for MMIS and State Employee Health portion of the system is January 2010 with Kansas Health Insurance Information System (KHIIS) integration following in March.

KHIIS Update

Drafts of two new reports were presented by Dr. Mavoori:

- 2007 Individual Premium Payments by Plan Type
 - o Includes 2 tables, one including all original data and a second which eliminated outliers (negative or extremely high premium amounts as determined by the standard Tukey outer fence statistical technique)
 - Data was based on claims in 2007
 - This data compared closely to MEPS (survey of employers and individuals) results of the nearest available year (2008)
- 2007 Claims and Membership by County
 - o Data was displayed in both summary table and geomap format
 - Based on claims activity in the county of the patient; this results in some duplication...if a person
 resided in more than one county in the course of the reporting year, or if he/she had more than
 one member ID during that period. Also note that persons covered, but not filing any claims
 during the reporting period, are not reflected in the number of members.
- Suggested improvements/enhancements add county names or 2-letter codes to the geomaps; use more distinct color variations in the geomaps; include a per capita analysis of the data; show distribution of certain types of claims (based on diagnosis) to track diseases and chronic illnesses

Health Professions Workforce Data Collection

A need for more complete information about the health professions workforce was identified and discussed in previous Data Consortium meetings. A new workgroup is being formed to further address this area. Eight Licensure Boards and interested Data Consortium members were invited to participate. The first meeting will be announced within a month. Interested parties are encouraged to contact Hareesh Mavoori or LaVerta Greve @ KHPA (296-8001).

Oral Health Workforce Assessment

Dr. Kim Kimminau and Dr. Tony Wellever, KU Medical Center, presented a summary of the "Kansas Extended Care Permit Dental Hygienist and Primary Care Dentist Surveys" which they recently completed on behalf or the Bureau of Oral Health at KDHE.

- Extended Care Permit Hygienist survey
 - o The target population included all 89 ECP Hygienists in Kansas (response rate was 79%)
 - Focus of survey was to obtain a profile of the current workforce, ECP characteristics and satisfaction level, barriers experienced and opinions of emerging oral health and dental practice policy issues
 - o Some of the findings:
 - ➤ the majority grew up in Kansas, in rural communities, graduated from a Kansas training program and work 8 hours/week or fewer as ECP
 - > most heard about the ECP program from the Dental Hygiene Association of Kansas or from their training programs while 17% were asked by their employers to obtain the permit
- Primary Care Dentist Survey
 - o Included a stratified sample of dentists (all those in "frontier counties" and serving in safety net facilities plus a sample of all others). Overall response rate was 77.7%
 - Survey questions focused on geographical distribution and demographics of current workforce, dentists plans for retirement, opinions about consumer access to dental care and about oral health and dental practice policy issues
 - o Among the findings:
 - > the field is dominated by white, non-Hispanic males
 - > women serve almost exclusively in safety net clinics
 - > most dentists who graduated from a rural High School have a rural practice, while only 25% of urban HS grads practice in a rural setting
 - > most accept commercial insurance, but far fewer accept Medicaid; the more urban the setting, the lower the Medicaid acceptance rate
 - ➤ few dentists have specific retirement plans, are in favor of more government regulations, or see a need for mid-level practitioners

Dr. Kimminau and Dr. Wellever recommend:

- the development of a routine, easy-to-administer workforce survey for all oral health providers
- an assessment of demand (they just addressed supply)
- a forum to bridge communication across oral health professions.

They invite questions/comments, directed to kkimminau@kumc.edu and awellever@kumc.edu

The Kansas Physician Workforce Project

Dr. Allen Greiner, KUMC, summarized a study that he worked on in 2006-07 of physician workforce shortages. Data used was from 2003-04 (most recent available at the time). Findings include:

- there is a relatively steady upward trend in the number of new licenses to practice in Kansas as well as renewed licenses (1975-2003)
- highest physician per capita rates by far are in urban areas and in northeast Kansas
- specialists are more concentrated in the urban and northeast Kansas counties

Recommendations:

- try to work with the Board of Healing Arts to systematize their data collection
- revisit the study every 2-4 years, updating the data
- attempt further analysis of what keeps physicians in the state
- assess whether expansion of graduate medical education programs would increase the number of physicians staying in Kansas (currently a lot of KU medical students go elsewhere for their residency and don't return)

Dr. Greiner welcomes questions via e-mail - AGREINER@kumc.edu

Future Meetings:

- Health Professions Workforce Data Workgroup Meeting will be announced in the next month
- Next scheduled Data Consortium meeting December 1, 2009 1:00-4:00 pm (Tentative)